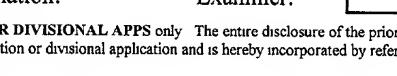
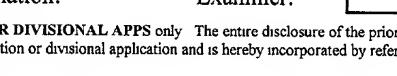
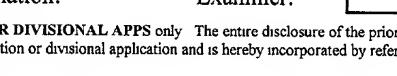


03-18-02

UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.:	SC11697TP
First Inventor:	Rama I. Hegde et al.
Title:	GATE DIELECTRIC AND METHOD THEREFOR
Express Mail Label No.:	EL721537519US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231																																					
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages 17 (preferred arrangement set forth below)</p> <ul style="list-style-type: none"> -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure <p>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets 1</p> <p>5. Oath or Declaration <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed) <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76</p> <p>18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in- Part (CIP) Prior Appl. No. <input type="text"/> Prior Appl. information: Examiner: <input type="text"/> Group/Art Unit: <input type="text"/> </p> <p>For CONTINUATION OR DIVISIONAL APPS only The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts</p> <tr> <td colspan="4" style="padding: 10px; text-align: center;">19. CORRESPONDENCE ADDRESS</td> </tr> <tr> <td colspan="2" style="padding: 5px;"><input checked="" type="checkbox"/> Customer Number or Bar Code Label</td> <td style="padding: 5px; text-align: center;">23125</td> <td style="padding: 5px;">or <input type="checkbox"/></td> </tr> <tr> <td colspan="4" style="padding: 5px;">Correspondence address below</td> </tr> <tr> <td colspan="4" style="padding: 5px;">Name <input type="text"/></td> </tr> <tr> <td colspan="4" style="padding: 5px;">Address <input type="text"/></td> </tr> <tr> <td colspan="2" style="padding: 5px;">City <input type="text"/></td> <td style="padding: 5px;">State <input type="text"/></td> <td style="padding: 5px;">Zip Code <input type="text"/></td> </tr> <tr> <td colspan="2" style="padding: 5px;">Country <input type="text"/></td> <td style="padding: 5px;">Telephone <input type="text"/></td> <td style="padding: 5px;">Fax <input type="text"/></td> </tr> <tr> <td colspan="2" style="padding: 5px;">Name <input type="text"/></td> <td style="padding: 5px;">Registration No. <input type="text"/></td> <td style="padding: 5px;">30,163</td> </tr> <tr> <td colspan="2" style="padding: 5px;">SIGNATURE </td> <td colspan="2" style="padding: 5px;">Date 3/15/02</td> </tr>				19. CORRESPONDENCE ADDRESS				<input checked="" type="checkbox"/> Customer Number or Bar Code Label		23125	or <input type="checkbox"/>	Correspondence address below				Name <input type="text"/>				Address <input type="text"/>				City <input type="text"/>		State <input type="text"/>	Zip Code <input type="text"/>	Country <input type="text"/>		Telephone <input type="text"/>	Fax <input type="text"/>	Name <input type="text"/>		Registration No. <input type="text"/>	30,163	SIGNATURE 		Date 3/15/02	
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SIGNATURE 		Date 3/15/02																																					

SC11697TP

**FEE
TRANSMITTAL**

Patent fees are subject to annual revision

Complete if Known

Application Number

Filing Date

Concurrently Herewith

First Named Inventor

Rama I. Hegde

Examiner Name

Group Art Unit

TOTAL AMOUNT OF PAYMENT

(\$978.00)

Attorney Docket No.

SC11697TP

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to

Deposit Account Number

13-4773

Deposit Account Name

Motorola, Inc.

Charge Any Additional Fee required under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION

BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Paid
101	740	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee
SUBTOTAL (1)				(\$740.00)

2. EXTRA CLAIM FEES

Total Claims	31	-	20	=	11	X	18	=	198
Independent Claims	3	-	3	=	0	X	84	=	0
Multiple Dependent					280	=	0		

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	* Reissue independent claims over original patent
110	18	210	9	*Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				(\$198.00)

**OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.
*For Reissues, see above

SUBMITTED BY

Name (Print/Type) James L. Clingan, Jr.

Registration No. 30,163 Telephone 512.996.6839

Signature

James L. Clingan, Jr.

Date 3/15/02

3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee	Fee Description
105	130	205	65 Surcharge - late filing fee or oath
127	50	227	25 Surcharge - late Provisional filing
139	130	139	130 Non-English specification
147	2520	147	2520 For filing a request for ex parte Reexamination
112	920*	112	920* Requesting publication of SIR prior to Examiner action
113	1840*	113	1840* Requesting publication of SIR after Examiner action
115	110	215	55 Extension for reply within first month
116	400	216	200 Extension for reply within second month
117	920	217	460 Extension for reply within third month
118	1440	218	720 Extension for reply within fourth month
128	1960	228	980 Extension for reply within fifth month
119	320	219	160 Notice of Appeal
120	320	220	160 Filing a brief in support of an appeal
121	280	221	140 Request for oral hearing
138	1510	138	1510 Petition to institute a public use proceeding
140	110	240	55 Petition to revive - unavoidable
141	1280	241	640 Petition to revive - unintentional
142	1280	242	640 Utility issue fee (or reissue)
143	460	243	230 Design issue fee
144	620	244	310 Plant issue fee
122	130	122	130 Petitions to the Commissioner
123	50	123	50 Processing fee under 37 CFR 1.17(q)
126	180	126	180 Submission of IDS
581	40	581	40 Recording each patent assignment per property (times number of properties)
146	740	246	370 Filing a submission after final rejection (37 CFR § 1.129(a))
149	740	249	370 For each additional invention to be examined (37 CFR § 1.129(b))
179	740	279	370 Request for Continued Examination (RCE)
169	900	169	900 Request for expedited examination of a design application
Other fee (specify)			
SUBTOTAL (3)			
(\$40.00)			

* Reduced by Basic Filing Fee paid

SUBTOTAL (3)

SC11697TP